



FH
[REDACTED]

STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]
[REDACTED]
[REDACTED]

DECISION

MQB/157166

PRELIMINARY RECITALS

Pursuant to a petition filed April 28, 2014, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Waukesha County Health and Human Services in regard to Medical Assistance, a hearing was held on May 20, 2014, at Waukesha, Wisconsin.

The issue for determination is whether the agency correctly denied the Petitioner's request to backdate her QMB benefits to February 1, 2014.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:

[REDACTED]
[REDACTED]
[REDACTED]

;

Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, Wisconsin 53703

By: Kathleen Jones, Benefit Recovery Specialist
Waukesha County Health and Human Services
514 Riverview Avenue
Waukesha, WI 53188

ADMINISTRATIVE LAW JUDGE:

Mayumi M. Ishii
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Waukesha County.
2. On February 10, 2014, the Petitioner signed a Wisconsin Medicaid for the Elderly, Blind or Disabled Application, requesting a three month backdate. (Exhibit 2)

3. On March 27, 2014, the agency received and processed Petitioner's application. It also sent the Petitioner a request for verification, which the Petitioner timely returned on April 14, 2014. (Exhibit 2; Testimony of Kathleen Jones)
4. On April 15, 2014, the agency sent the Petitioner a notice indicating that her February 1, 2014 application for QMB benefits was approved and that she would receive benefits effective May 1, 2014. (Exhibit 3)
5. The Petitioner filed a request for fair hearing that was received by the Division of Hearings and Appeals on April 28, 2014. (Exhibit 1)
6. On April 30, 2014, the agency sent the Petitioner a Positive Notice, indicating that her QMB benefits were approved, effective April 1, 2014. (Exhibit 4)

DISCUSSION

Petitioner filed an appeal, because she would like her QMB benefits back dated to February 2013.

Per Medicaid Eligibility Handbook §32.8.1, QMB benefits may be backdated when the eligibility process was not completed within 30 days or certification of eligibility was not completed.

In the case at hand, the agency received the application on March 27, 2014. The agency completed the eligibility process within thirty days, sending notice of Petitioner's eligibility on April 15, 2014. As such, there is no basis upon which to backdate the Petitioner's benefits to February 1, 2014.

CONCLUSIONS OF LAW

The agency correctly denied the Petitioner's request to backdate her benefits to February 1, 2014.

THEREFORE, it is

ORDERED

That the petition is dismissed.

REQUEST FOR A REHEARING

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as "PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

APPEAL TO COURT

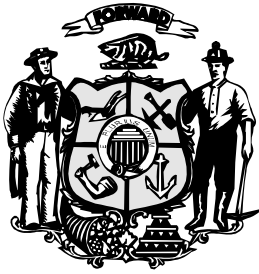
You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Room 651, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Milwaukee,
Wisconsin, this 3rd day of July, 2014.

\sMayumi M. Ishii
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on July 3, 2014.

Waukesha County Health and Human Services
Division of Health Care Access and Accountability